



*Louisiana Department of Public Safety and Corrections*  
**Office of Motor Vehicles**  
International Registration Plan Section

## **TRIP PERMIT APPLICATION**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Owner Unit Number** \_\_\_\_\_ **Trip Permits in Bulk** \_\_\_\_\_

Issue Date	Effective Date	Expiration	Time
			____:____ AM/PM

VIN Number	Year	Make	Vehicle Type	US DOT#	Vehicle Empty Weight

Registered Jurisdiction	City	Current License Plate

Signature of Owner	Date	Email
Printed Name of Contact Person	Telephone# ( ) -	Fax# ( ) -

- **\$50.00 permit is valid for 48 hours.**
- **A trip permit once secured must be carried in the cab of the vehicle and it is non-transferable.**

Staff Only:	Office:	Date Processed:
Operator ID:	Permit Number:	

Louisiana IRP Processing Center  
P.O. Box 64848  
Baton Rouge, LA 70896  
877-905-3854 (phone)  
337-993-1801 (fax)